





<b>Issue Classification</b> 	Application/Control No.	Applicant(s)/Patent under Reexamination	
	10/618,288	BARTA ET AL.	
	Examiner	Art Unit	
	Emily Bernhardt	1624	

ISSUE CLASSIFICATION											
ORIGINAL		CLASS	CROSS REFERENCE(S)								
CLASS	SUBCLASS		SUBCLASS (ONE SUBCLASS PER BLOCK)								
544	364	544	130	238	295	357	360	336	366		
INTERNATIONAL CLASSIFICATION		544	367	369	374	383	408				
C 07 D	405 1 14	546	187	193	194	207	210	212	214		
C 07 D	405 1 12	546	233								
A 61 K	31 1 496	514	235.5	252.02	252.03	252.11	252.18	253.09	253.12		
	1	514	253.11	254.1	254.05	255.02	255.05	254.03	254.05		
	1	514	255.03	314	316	318	323	326	327		
(Assistant Examiner) (Date)		 <b>EMILY BERNHARDT</b> <b>PRIMARY EXAMINER</b> <b>GROUP 1600</b>						Total Claims Allowed: 2			
 (Legal Instruments Examiner) (Date)								O.G. Print Claim(s) 1			O.G. Print Fig. 1

<input checked="" type="checkbox"/> Claims renumbered in the same order as presented by applicant				<input type="checkbox"/> CPA				<input type="checkbox"/> T.D.				<input type="checkbox"/> R.1.47			
Final	Original	Final	Original	Final	Original	Final	Original	Final	Original	Final	Original	Final	Original	Final	Original
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	4		34		64		94		124		154		184		214
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	15		45		75		105		135		165		195		225
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	22		52		82		112		142		172		202		232
	23		53		83		113		143		173		203		233
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	25		55		85		115		145		175		205		235
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	30		60		90		120		150		180		210		240

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ISSUE CLASSIFICATION (CONT'D.)									
ORIGINAL				CROSS REFERENCE(S)					
CLASS		SUBCLASS		CLASS	SUBCLASS (ONE SUBCLASS PER BLOCK)				
INTERNATIONAL CLASSIFICATION									
			/						
			/						
			/						
			/						
			/						
(Assistant Examiner) (Date)				Total Claims Allowed:					
(Legal Instruments Examiner) (Date)									
				(Primary Examiner) (Date)					
				<div style="display: flex; justify-content: space-between;"> <div>O.G. Print Claim(s)</div> <div>O.G. Print Fig.</div> </div>					

<input type="checkbox"/> Claims renumbered in the same order as presented by applicant				<input type="checkbox"/> CPA				<input type="checkbox"/> T.D.				<input type="checkbox"/> R.1.47			
Final	Original	Final	Original	Final	Original	Final	Original	Final	Original	Final	Original	Final	Original		
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	214		244		274		304		334		364		394		
	215		245		275		305		335		365		395		
	216		246		276		306		336		366		396		
	217		247		277		307		337		367		397		
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	219		249		279		309		339		369		399		
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	221		251		281		311		341		371		401		
	222		252		282		312		342		372		402		
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	225		255		285		315		345		375		405		
	226		256		286		316		346		376		406		
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